ALASKA CITIZEN REVIEW PANEL

ANNUAL REPORT

2015

Alaska Citizen Review Panel evaluates the policies, procedures, and practices of state and local child protection agencies for effectiveness in discharging their child protection responsibilities. The Panel is mandated through CAPTA 1997 (P.L. 104-235), and enacted through AS 47.14.205.

212 Front Street, Suite 100, Fairbanks, AK 99701

www.crpalaska.org
ABOUT THE PANEL

AUTHORITY: The Alaska Citizen Review Panel (CRP) is federally mandated through the 1996, 2003, and 2010 amendments to the Child Abuse Prevention and Treatment Act (CAPTA), and authorized through Alaska Statute Sec. 47.14.205. The Panel operates under a set of operating guidelines, available on the Panel’s website.

FUNCTIONS: The primary purpose of Citizen Review Panels is to assist state and local child protection systems to be more responsive to community needs and opportunities in providing child protection services through evaluation and public outreach. In Alaska, the designated child protection agency is the Office of Children’s Services (OCS). Therefore Alaska CRP:

- Evaluates the extent to which OCS is effectively discharging its child protection responsibilities under:
  - The State Plan submitted to the U.S. Department of Health and Human Services under 42 U.S.C. 5106a(b);
  - Child Protection Standards under federal and state laws; and
  - Any other criteria that the CRP considers important to ensuring the protection of children

Conducts public outreach and gathers public comment on current OCS procedures and practices involving children and family services.

The Panel is not a grievance redress mechanism, and thus is not equipped to address any concerns on individual cases.

STRUCTURE AND MEMBERSHIP: Membership on the Panel is voluntary, and expected to represent the diversity of the state. The Panel selects its own members, through a formal recruitment process. Members elect a Chair and Vice Chair from among the membership. While members are expected to serve for at least two years, there are no stipulated term limits. The panel membership during 2014-2015 included the following (* indicates the member resigned during this work year, and + indicates the member joined the panel during this year):

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>City</th>
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<tbody>
<tr>
<td>Chair</td>
<td>Diwakar Vadapalli</td>
<td>Anchorage</td>
</tr>
<tr>
<td>Vice Chair</td>
<td>Dana W. Hallett</td>
<td>Haines</td>
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<tr>
<td>Members</td>
<td>Ben Creasy*</td>
<td>Juneau</td>
</tr>
<tr>
<td></td>
<td>Bettyann Steciw</td>
<td>Anchor Point</td>
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<td></td>
<td>Jen Burkmire*</td>
<td>Wasilla</td>
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<td></td>
<td>Margaret McWilliams</td>
<td>Juneau</td>
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<td></td>
<td>Donna M. Aguiniga*</td>
<td>Anchorage</td>
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<td>Rebecca Vale*</td>
<td>Anchorage</td>
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<td></td>
<td>Rodreshia Dunbar*</td>
<td>Anchorage</td>
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</tbody>
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STAFF SUPPORT: Information Insights, Inc. provided staff support under a contract with the State of Alaska.
The Panel expresses its gratitude to all the staff and leadership of the Office of Children Services for their dedicated work keeping Alaska’s children safe, and being available to us through the year. The Panel recognizes the difficult jobs they have, filled with painful decisions, and greatly appreciates their willingness to continue to serve some of the most vulnerable children and families of Alaska.

The Panel also thanks all the partner agencies and their staff for being available for consultation, their thoughtful reflections, and helpful suggestions.

The Panel is thankful to all the individuals that served as resource persons to the Panel.

The Panel thanks Rep. Paul Seaton, Chairman of the House Committee on Health and Social Services, and all the Committee members for encouraging the Panel and providing a forum for meaningful and constructive dialogue.

Editorial review: Virgene Hanna, ISER, UAA

The Citizen Review Panel is tasked with reviewing the policies, procedures, and practices of state and local child protective services in Alaska. In that capacity, this report notes the Panel’s observations on various components of the system in Alaska. The Panel’s review is intended to provide constructive feedback to inform OCS’ policy and practice. No observation should be construed as critical of any individual OCS employee.
EXECUTIVE SUMMARY

The Alaska Citizen Review Panel continued its structural reforms from 2013-2014 and streamlined more of its operations during 2014-2015. All four goals from last year were retained. In addition, in response to the concerns evidenced during the previous year, two goals – one related to data management practices, and another related to foster care – were added. All goals are listed in the work plan section of this report. Where possible, the Panel tried to follow a dual track approach examining both policy and practice on each goal, and examined the differences between stated policy and actual practice. In addition to the set goals, the Panel examines several issues as they surface during the course of the Panel’s work through the year.

Owing to its lack of capacity, the Panel frequently ends the year with much work yet to be completed on each goal, and many issues needing further understanding and examination. Findings and recommendations are limited by the information available to the Panel. This report and other Panel documents are part of a continuing dialogue between the Panel representing the community’s child protection needs and the OCS as the designated agency mandated to serve those needs. Therefore, the Panel hopes that these recommendations will spur further conversations and meaningful change.

2014-2015 RECOMMENDATIONS

**Recommendation 1:** OCS continue to implement the Panel’s 2013-2014 recommendations on intake policy.

**Recommendation 2:** OCS constitute an internal task force to specifically focus on in-home service model. This task force should be tasked with operationalizing Strategy 2.A.2 of the 2015-2019 CFSP.

* • In collaboration with local service providers, assess the existing in-home model as it exists in each region.
* • Identify additional, more specific outcomes with respect to Strategy 2.A.2 of the 2015-2019 CFSP.

**Recommendation 3:** OCS address the root cause of the Initial Assessment (IA) backlog:

* • Identify the nature of cases that are due past 30 days, 60 days, 90 days, and 120 days.
* • Revisit the Differential Response process and examine its fit to the current situation

**Recommendation 4:** Improve efforts to recruit and retain resource families across the state:

* • Identify, and advertise through appropriate channels, a clear message on the approximate numbers of resource families needed.
* • Identify outcome measures and track success of recruitment and retention efforts.

**Recommendation 5:** Improve the survey instruments and reporting of results on various surveys that OCS QA unit conducts to assess important components of OCS operations.

**Recommendation 6:** Adopt a method to identify, measure, and assess various components of workload of frontline workers.
The Panel’s 2014-2015 annual calendar included the following activities. Reports on all major activities are available on the Panel’s website at www.crpalaska.org.

MONTHLY PANEL MEETINGS: The Panel met first Tuesday of every month, with some minor deviations. Owing to the geographic dispersion of the panel members, all meetings by default are held over the telephone. October 2014 and June 2015 meetings were held in person in Anchorage. All monthly Panel meetings are open to public. Meeting agenda, date, time, location, and the call-in number to participate are announced a week prior to the meeting, and posted both on the Panel’s website and on State of Alaska online public notices website. Summary minutes are posted on the Panel’s website. Agency representatives or others with experience and expertise on a specific practice or policy are often invited to present to the Panel at its monthly meeting.

MONTHLY MEETINGS WITH OCS: In order to maintain a healthy working relationship, and to be informed of the latest developments in practice and policy, the Panel regularly met with Ms. Christy Lawton, Director of OCS and Mr. Travis Erickson, Division Operations Manager. Specific questions and concerns on various policies and practices of OCS are often addressed. Meetings with OCS are not open to public.

SITE VISITS: The Panel conducts visits to various OCS regional and field offices to gather information on practice and assess working relationships between OCS and its local partners. The Panel’s observations and recommendations are documented in a report and are subsequently discussed with the OCS’ state and the region’ leadership. All site visit reports are available on the CRP website. The Panel conducted three site visits during 2014-2015: Anchorage Regional Office (ARO) in October 2014, Southeast Regional Office (SRO) in January 2015, and Western Regional Office (WRO) in May 2015.

REPORT TO THE LEGISLATURE: Each February, the Panel attempts to present a summary of its previous year’s work and an update on the current year’s work to the Health and Social Services (HSS) Committees of both the Alaska House and Senate. The Panel has been unsuccessful in securing a hearing with the Senate HSS

### 2014-2015 CALENDAR

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<thead>
<tr>
<th>Panel Meetings</th>
<th>Meetings with OCS</th>
<th>Site visits</th>
<th>Other</th>
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<td>Jul 1, 2014</td>
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<td>Jan 6, 2015</td>
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<td>Jan 21-24, 2015 SRO</td>
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<td>Feb 3, 2015</td>
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<td>Feb 11-13, 2015 Visit to the legislature</td>
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<td>Apr 7, 2015</td>
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### 2014-2015 PRESENTATIONS TO THE PANEL

<table>
<thead>
<tr>
<th>Month</th>
<th>Person</th>
<th>Title</th>
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<tr>
<td>Mar 2015</td>
<td>Aileen McInnis</td>
<td>Director, Alaska Center for Resource Families</td>
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<tr>
<td>Apr 2015</td>
<td>Yuri Miller and Tandra Donahue</td>
<td>OCS Foster Care Licensing Managers</td>
</tr>
<tr>
<td>May 2015</td>
<td>Carla Erickson</td>
<td>Chief Assistant Attorney General</td>
</tr>
</tbody>
</table>
Committee for the last three years. The Panel also meets with other legislators, legislative staff, Governor’s office, and the leadership of the Department of Health and Social Services (DHSS) during this visit. A brief report with the details of this visit and a recording of the Panel’s presentation is posted on the Panel’s website.

OUTREACH ACTIVITIES: The Panel reaches out to the public and various stakeholder groups to collect public comment. The Panel maintains an active website [www.crpalaska.org](http://www.crpalaska.org) that hosts all Panel documents and also serves as a means for the public to reach the Panel. The Panel also meets with or participates in meetings of various other groups, panels, and commissions to inform them of the Panel’s activities. Such activities included:

- **Sep 18, 2014** Anchorage Meeting with the Children’s Justice Act Task Force
- **Nov 24, 2014** Anchorage Meeting with the Coordinator of the Court Improvement Project
- **Dec 3, 2014** Anchorage Presentation to the ICWA representatives at the BIA Providers Conference
- **Dec 9, 2014** Anchorage Meeting with the Children’s Justice Act Task Force
- **Dec 19, 2014** Anchorage Meeting with Aileen McInnis, Director of the Alaska Center for Resource Families
- **Jan 15, 2015** Anchorage Presentation to the OCS Leadership Summit
- **Jan 15, 2015** Anchorage Meeting with several OCS senior staff on the new Maltreatment Assessment Protocol (MAP)
- **Mar 18, 2015** Anchorage Meeting with Dr. Beth Sirles, Director of the School of Social Work, UAA
- **May 22, 2015** Anchorage Meeting with Rep. Paul Seaton, Chair of the Alaska House HSS Committee
- **May 28, 2015** Anchorage Alaska conversations that matter – The wellbeing of our children

CRP NATIONAL CONFERENCE: In its attempts to critically examine its activities the Panel identified the CRP National Conference as a resource. The Chair and Vice Chair of the Panel attended the National Conference held in Portland, OR in May 2015. A detailed report of observations and recommendations from the Conference is available on the CRP website.

CHANGES TO PANEL OPERATIONS: The Panel adopted a set of operating guidelines in December 2014, opened up Panel monthly meetings to public in February 2015, streamlined site visits, developed templates for site visit reports, and improved the website.

For two years, the Panel has been exploring ways to initiate reviewing cases and conduct surveys as part of its annual activities. Both are recognized tools for effective Panel operations, and are used by several other Panels from across the country. Due to Panel’s resource constraints, both tools will need innovative partnerships to leverage necessary resources. The Panel’s attempts to recruit a student intern from UAA School of Social Work were unsuccessful. While this option will be explored again next year, the Panel is exploring other avenues to recruit help and meet its mandate.

*The Panel reviews the policies, procedures, and practices of the state and local child protection agencies in Alaska. The Panel’s review is limited to systemic factors of policy and practice, and does not involve examining individual case outcomes. As part of its outreach efforts, the Panel serves as an important conduit for information between the child protection agency and the general public. All of the Panel’s activities throughout the year serve both the review and outreach functions.*
WORK PLAN

The Panel's annual work plan contains three components of the Panel's responsibilities: specific goals as part of the Panel's mandate of review and outreach; associated travel including site visits; and specific activities to change or improve its operations. Panel's travel and operational improvements are reported in the previous section of this report.

Work plan goals evolve in the course of the Panel's activities. The Panel maintains a running list of topics/issues/concerns, and picks the top four to six goals each year. If sufficient progress on a goal has not been made, that goal may be retained for the following year. The Panel retained all four goals from the 2013-2014 work plan and added two new goals this year.

GOAL 1: What are the policy guidelines for screening Protective Service Reports? *(retained from last year)* The screening decision, the very first decision OCS makes in any case, is extremely important. This decision may mean the difference between necessary intervention and undesirable intrusion into a family's life. With a large number of cases being screened out over the last several years, the Panel examined the process of screening and the results of the screening decision.

GOAL 2: What is the practice model for in-home service delivery (urban and rural)? *(retained from last year)* Once screened in for services, many children are left at home with their caregivers. Both the children and their families are expected to receive services to help them alleviate the risks for child maltreatment. However, much of the state is remote and such services are unavailable. The Panel examined the magnitude of this caseload.

GOAL 3: IA Backlog – without an increase in the workforce, what is the current plan for avoiding another backlog? *(retained from last year)* Initial Assessments (IA) are conducted immediately after an allegation is screened-in for further investigation. OCS has had some challenges in conducting these IAs in a timely fashion. The Panel examined the methods OCS uses to minimize and prevent IA backlog.

GOAL 4: Assess the need for services in communities in Alaska. *(retained from last year)* With the closure of the Unalaska field office in 2012, the Panel wanted to examine the unmet needs for child protection services in the region that was covered by that field office. However, due to limited resources and capacity, this goal was never successfully pursued.

GOAL 5: Understand the challenges of the Online Resources for Children in Alaska (ORCA) database. ORCA is OCS’s data and case management system. While all such systems have their limitations, OCS staff seem to have extreme challenges using the system despite its multi-million dollar improvements. The Panel examined parts of this system to better understand these challenges.

GOAL 6: What are OCS’ strategies to recruit and retain resource families? Shortage of families available to foster children in need of a home has been a consistent issue over the last several years. The Panel examined the recruitment strategies employed by OCS to recruit resource families across the state.
GOAL 1: What are the policy guidelines for screening Protective Service Reports?

The Panel focused on the intake process for at least two reasons. First, the Panel gathered public comment over the last two years that children are being left in unsafe conditions despite reporting. In response, the Panel examined the policy on screening decision during 2013-2014 reporting period (see last year’s report available on the CRP website). Second, there were several discussions during the current year on extreme turnover among frontline workers, and high workloads at OCS. Every allegation triggers the screening process, consuming staff time. With increasing numbers of PSRs each month, the Panel is concerned that cases may not be getting the necessary attention.

Every call OCS receives is recorded as a PSR. OCS has received approximately 16,000 PSRs each year since 2011. Each PSR may contain multiple allegations of maltreatment involving multiple children and multiple perpetrators. A PSR is considered screened-in if at least one allegation is screened-in. Just above 50 percent of PSRs were screened-in for further investigation in 2014, the highest percentage since 2009. This means, nearly half of the reports OCS received were screened-out each year. Northern Regional Office (NRO) consistently had the highest percentage of screened-out cases, with more than 50% screened out each year. On the other hand, Western Region saw the lowest screen-out rate each year since 2010.

OCS records eight different reasons for screening-out an allegation. Of the eight, a large majority of the allegations are screened out because they “do not meet IA criteria.” OCS Child Protective Services Manual defines ‘Does Not Meet Initial Assessment Criteria (formerly titled No Alleged Maltreatment)’ as: “Information does not indicate that the child may be unsafe or at a high risk of maltreatment by a primary caregiver, parent, custodian or guardian.” The percentage screened out that did not meet the IA criteria” is highest in NRO, consistently at or above 80% since 2011. While Native Village of Barrow has exclusive jurisdiction, only a minute number of cases are screened out to the Tribe. WRO consistently had the lowest percentage through the same years.

OCS intake was handled locally by frontline social workers in each field and regional office until 2011 when the current regional intake system was introduced. Regional intake improved consistency but several local partners complained about the loss of direct contact with local personnel, and a general lack of information about follow up on a PSR. OCS is currently working towards a state-wide centralized intake, expected to be implemented by 2017, to further improve practice consistency.
While regional intake brought some consistency to the screening decisions, these regional differences indicate some systematic differences between regions. In order to adequately understand these differences, the Panel will continue to follow these trends next few years. To facilitate this work, the Panel developed a flowchart of the decision process. We hope this flowchart will serve as a communication tool between OCS, its various partner agencies, and the general public. It was reviewed by OCS for accuracy. OCS informed the Panel that a new decision making tool for screening is being developed.

OCS’ intake process is a relatively short but complex process. The flowchart shows several detailed steps beginning from the reporter of the alleged maltreatment calling in, to the screening decision and immediate follow up. The entire process typically takes no longer than 24 hours. This turnaround time is challenging, especially considering the impact this may have on the child’s or family’s life. The flowchart is a series of sentences represented by key phrases connected by arrows. Starting at any box, it is best to read along the direction of the arrows for a logical flow of decisions.

Recommendation 1: OCS continue to implement the Panel’s 2013-2014 recommendations on intake policy.

The Panel’s 2013-2014 annual report recommended several changes to the intake processes. OCS agreed with all recommendations and noted that they will be implemented in due course. However, as of the date of this report, the Panel is not aware of any changes to the intake policy in response to those recommendations. As the intake policy evolves and new protocols are adopted, the Panel strongly encourages OCS to implement the recommendations from the previous annual report.
GOAL 2: What is the practice model for in-home service delivery (urban and rural)?

In-home cases are those where children are left in their home while services are provided to the children and their families to improve child safety. Among other challenges with in-home cases, many remote rural areas of the state do not have access to necessary services. Without the recommended services, conditions can worsen and children may be at higher risk of harm. OCS acknowledges that Alaska needs a better model for providing services. The Panel understands that OCS plans to develop a meaningful and feasible model by mid-2016 as identified in the 2015-2019 Children and Family Services Plan (2015-2019 CFSP). The Panel examined OCS’ in-home caseload for the last few years. Specifically, in response to the Panel’s discovery that in-home case workers have logistically impossible caseloads, the Panel requested data on the number of children being served in their homes. Complete data was available for years 2011 through 2014 for each region. There are several important nuances to be aware of before discussing these data. We were advised by OCS data managers that the count of in-home cases is accurate when examining current open cases. However, due to various limitations of the data, in-home case counts from previous months and years may be inaccurate. Despite these limitations, the larger story here is consistent and one that OCS seems to concur.

The number of children receiving services in their homes increased over the four years since 2011. On average, 215 children in Alaska were receiving in-home services each month during 2011, compared to 809 in 2014 – an increase of 279 percent in four years. While all regions saw an increase in the number of children in in-home cases, children in in-home care formed a small percentage of total children with OCS contact in ARO and SCRO. The more remote regions (SRO, NRO, and WRO) had a higher percentage of children in in-home situations.

WRO had the most dramatic increase in the number of children receiving services in their homes. The Panel’s site visit reports to WRO both in 2014 and 2015 documented this rise. The Panel has been focused on WRO since its formation. The region is facing several challenges, and the rise in number of children in in-home cases is an illustration of those challenges. WRO is the only region with more children in in-home situations than in out-of-home situations. More recent numbers show that the number of in-home cases in WRO decreased from over 400 in January 2014 to under 200 in February 2015. These fluctuations add to the intrigue of WRO. With 45 communities spread across a vast region, there are limited services for in-home cases in the region.

On the other hand, both ARO and SCRO are regions where most services are available for a successful in-home model. Contrary to what one would expect, these regions have the least number of in-home cases.
The lack of in-home services in remote rural areas of Alaska was a major finding in both the 2002 and 2009 Child and Family Services Reviews (CFSR) conducted by the Children’s Bureau (CB). The 2010-2014 CFSP included a planned strategy and action steps to develop an in-home case model. Strategy A.3.6 stated “redesign In-Home Program Model to increase number of children served in their own homes and enhance reunification efforts” (page 26). The table shows OCS’ efforts over the plan period on each of the planned action steps and benchmarks under strategy A.3.6. The year noted in the right column in bold indicates the most recent year in which progress was reported in that year’s Annual Progress & Services Report (APSR). It is notable that three out of the four action steps where no progress was reported deal substantially with data on in-home cases. This is illustrative of OCS’ challenges mentioned earlier with tracking and compiling data on in-home cases.

The 2015-2019 CFSP includes Strategy 2.A.2 which states, “new in-home services model will be fully implemented with fidelity by December 2016” (page 55). While the Panel looks forward to the progress on this strategy, the outcome measures listed are focused on decreasing removals to foster care, increasing reunification rates, and decreasing repeat maltreatment. These

<table>
<thead>
<tr>
<th>Planned action steps and benchmarks on in-home services (Child and Family Services Plan 2010-2014)</th>
<th>Progress reported in the Annual Progress and Services Report (APSR) each year</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.3.6.1 Develop program statement for in-home family services.</td>
<td>2010 APSR: Achieved. This was developed as part of action step A.1.1 and was completed in February 2010.</td>
</tr>
<tr>
<td>A.3.6.2 Request technical assistance (TA) from National Resource Center (NRC) for redesign of an in-home family services program.</td>
<td>2010 APSR: Achieved. TA was requested in May 2010. Work will begin in July 2010. Work will be coordinated with the NRC - Western Pacific Implementation Center project.</td>
</tr>
<tr>
<td>A.3.6.3 Develop work plan with NRC for design and implementation of an in-home family services program.</td>
<td>2011 APSR: Achieved. Work plan submitted and approved February 2011.</td>
</tr>
<tr>
<td>A.3.6.4 Analyze existing Family Support, Family Preservation and Time Limited Reunification grants to ensure outcomes are reflective in supporting needs of children and families on a regional level</td>
<td>No progress reported as of 2014 APSR.</td>
</tr>
<tr>
<td>A.3.6.5 Collect systematic data and develop reports that will provide data to track utilization at a youth/family, local and regional levels.</td>
<td>No progress reported as of 2014 APSR.</td>
</tr>
<tr>
<td>A.3.6.6 Work with OCS leadership, regional CSMs and local offices to review data and realign resources, if warranted, based on analysis.</td>
<td>No progress reported as of 2014 APSR.</td>
</tr>
<tr>
<td>A.3.6.7 Assess data to determine if ORCA is representing accurate in-home population.</td>
<td>2010 APSR: Achieved. Based on assessment of data, the ORCA design and maintenance team created and implemented an enhancement that allows workers to quickly and easily change the status of a case from initial assessment to in-home family services or out-of-home family services.</td>
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<tr>
<td>A.3.6.8 Revise in-home policy and disseminate to all Anchorage and Fairbanks staff.</td>
<td>2012 APSR: Achieved. The revised policy was disseminated to Anchorage and Fairbanks staff on 10/11/11 with an effective date of 10/17/11 to coincide with the staff development that occurred during the first two weeks of October 2011.</td>
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<tr>
<td>A.3.6.9 Provide staff development to all OCS field management and front line workers in Anchorage and Fairbanks related to the in-home family services program.</td>
<td>No progress reported as of 2014 APSR.</td>
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outcome measures do not directly assess quality or quantity of the provision of in-home Services. Strategy A.3.6.5, “collect systematic data and develop reports that will provide data to track utilization at a youth/family, local and regional levels” from the previous (2010-2014) CFSP is not included in the current 2015-2019 CFSP. However, this will be an important step in assessing progress on designing and implementing new in-home services model.

OCS prepared a Title IV-E waiver application to design and implement an in-home strategy in the SCRO and SRO regions but withdrew the application. Such a waiver would provide the opportunity to examine unique models that might suit Alaska’s context. Along the same lines, OCS’ attempts to gain support from the Anne E. Casey Foundation to develop an in-home model seems to have been unsuccessful. Despite these unsuccessful attempts, there seems to be significant progress in tribal in-home services in various regions in the state. The Panel is aware of such models in the SRO, ARO, and NRO. In all regions, specific tribal entities work closely with OCS to develop and implement a culturally sensitive array of in-home services to preserve Alaska Native families. With very distinct systems of care, these tribal entities will likely differ in the types of services offered and the methods used in offering such services. Since OCS is the designated entity responsible for the safety of all Alaskan children, it will be important for OCS to track the performance of these distinct systems of care. The Panel is not aware of any such plans. The Panel did not examine any of these existing models, and hope to learn more about their effectiveness.

WRO seems to have the most challenges in providing in-home services. The OCS QA unit recently completed a comprehensive assessment of all in-home cases, with a focus on case management. Out of 82 cases reviewed, 20 were marked “urgent” and sent for immediate action. The remaining 62 were all in need of immediate follow up due to the impending danger, lack of safety planning, case planning, and extended periods with no contact with the family. This, the Panel suspects, is a direct consequence of impossible workloads, inadequate staff, high turnover, challenging geography, and a simple lack of adequate number of service providers in the region. The Panel’s most recent site visit to WRO in May 2015 noted the high turnover in the region, associated challenges, and consequent impacts on service provision. In addition, as reported in every site visit report for the last several years, lack of effective working relationships between OCS and its local partner agencies is counterproductive. The Panel recommended in past years that OCS develop a formal structure for initiating and sustaining formal partnerships with local partners.

With wide variations across regions in availability and accessibility of services for in-home cases, in-home services provided by OCS needs a critical examination. No reliable data is available for a systematic assessment of the availability, accessibility, and quality of services in any region. Designing a new service model will necessarily require a deeper understanding of the existing system. The current CFSP strategy 2.A.2 is vague and the proposed outcome measures do not directly assess the success of the service provision. The Panel recommends that OCS constitute a task force to specifically focus on in-home service model. This task force should operationalize Strategy 2.A.2.

**Recommendation 2:** OCS constitute an internal task force to specifically focus on in-home service model. This task force should be tasked with operationalizing Strategy 2.A.2 of the 2015-2019 CFSP.

- In collaboration with local service providers, assess the existing in-home model as it exists in each region.
- Identify additional, more specific outcomes with respect to Strategy 2.A.2 of the 2015-2019 CFSP.
GOAL 3: IA Backlog – without an increase in the workforce, what is the current plan for avoiding another backlog?

Every report OCS receives is recorded as a PSR and if an allegation in a PSR is screened in, an Initial Assessment (IA) is the second step in the progression of a case. All allegations that are screened-in are assessed for actual harm, and risk of harm to the child. The final outcome of the IA process is a substantiation decision. If the alleged maltreatment is substantiated, the child is either removed from home into foster care, or services are provided to improve safety in the home. An IA is expected to be completed within 30 days of the assignment of the IA to a worker, and all documentation must be entered into the online database management system within 15 days of completion. However, many IAs get delayed for various reasons such as difficulty in reaching appropriate parties to corroborate information. Regardless of the reasons for the delay, an incomplete IA indicates a child in potential danger, one who needs help and is likely not being helped.

OCS seems to have periodic challenges in completing IAs in a timely manner, even after considering delays due to valid reasons. A small number of the IAs remain open as many as 60, 90, or 120 days after assignment. Accumulation of delayed IAs has reached alarming numbers in a regular manner over the last several years. The first such instance that the Panel is aware of was in 2004, when more than 4,000 IAs were incomplete. A similar situation with comparable numbers occurred in 2008 and again in 2012.

OCS’ response to the most recent backlog in 2012 included an infusion of experienced workers from across the state into IA units in various field offices to clear pending IAs. While the IAs were cleared efficiently, the Panel was concerned about the safety of the children represented by the cases cleared so rapidly. The Panel was unsuccessful in obtaining any data on the IAs that were cleared through this expedited process. The Panel’s 2014 annual report detailed several OCS’ efforts to prevent another such backlog. The Panel has since been following the number of past due IAs.

Despite all the efforts in preventing another backlog of 2012 proportions, the most recent data show that the volume of past due IAs is slowly increasing, and is close to the levels in 2008 and 2012. This trend may be indicative of many things. IA process is very tedious, involving several steps of information gathering, risk assessment, home visits, court dates, and judgements. It involves coordinating with various service providers associated with the family and the child. The IA units across the state are overburdened, and the Panel gathered during site visits that these units are the least preferred by frontline workers. Workers in at least two IA units across the state have more than 40 cases on their work load at one time. This coupled with high turnover in IA units can cause severe disruption in workflow, and cases of lower priority may be set aside to be examined later.

During one of the Panel’s site visits, more than one frontline worker indicated that screening decisions are made with little or no knowledge of the child or the family, and thus, what might seem like a genuine case of maltreatment from a distance might actually be a simple case of misunderstanding. Such IAs will obviously take a lower priority to more severe cases of maltreatment known to the local worker. Such gaps in communication between a regional intake team and frontline IA workers can be another cause for the spike.
Many states implemented a Differential Response (DR) system to address similar backlogs. Alaska had a DR system from 1999 to 2009. The DR system was designed to address cases with no violent criminal convictions involving weapons, no sexual offence convictions, no felony convictions for substance abuse in the last 6 months, and no prior substantiated investigation within a 6 month period. Similar to the in-home services in some regions in Alaska, a local service provider was identified to directly provide services to the child and family in low-risk cases that were not being addressed by OCS due to lack of adequate workforce. An initial evaluation found positive results both on case outcomes and worker performance and satisfaction. The DR program was discontinued in 2009 due to the loss of legislative funding allocated for the program. A similar approach could be explored again for low-priority cases, thus reducing the burden on the IA units, and helping to keep the number of overdue IAs under control.

If the past trends hold, IA backlog will reach the 4,000 mark in mid-2016. That will be the fourth time in the last 12 years, at regular intervals of 4 years. The Panel recommended in 2014 that OCS develop a systemic approach to avoid another IA backlog. We reiterate that same recommendation with a few specific suggestions.

**Recommendation 3: OCS address the root cause of the Initial Assessment (IA) backlog:**
- Identify the nature of cases that are due past 30 days, 60 days, 90 days, and 120 days.
- Revisit the Differential Response process and examine its fit to the current situation.

**GOAL 4: Assess the need for services in communities in Alaska**

Following the closure of the OCS field office in Unalaska, the Panel intended to assess the need for services in the region covered by that field office. It was included as a goal in the 2013-2014 work plan. Due to lack of resources, this goal was never addressed. This goal was transformed in the 2014-2015 work plan to conduct an assessment of service provision in different regions of the state. The Panel could not accomplish the goal this year, again due to lack of resources. However, considerable progress was achieved. The Panel now has a comprehensive list of service providers in three of the five regions in Alaska. This allows the Panel to efficiently connect with the providers during site visits. The Panel intends to continue its work in compiling lists of service providers for the remaining regions, and conduct periodic assessments of various components of child protection services in the state.

**GOAL 5: Understand the challenges of the Online Resources for Children in Alaska (ORCA) database**

ORCA is the online database system that OCS uses for case management and reporting. The Panel consistently hears from frontline workers that ORCA is very cumbersome, and some tools within the system do not function as expected. In response, the Panel decided to examine the difficulties that ORCA presents to the frontline worker. The Panel’s main purpose under this goal was to understand the actual challenges that frontline workers face. However, in pursuit of the goal, it was quickly apparent that such an exercise is nearly impossible unless we reach a substantial number of frontline workers to gather their opinions. Instead, the Panel requested screenshots of ORCA as they appear to a frontline worker. These screen shots, the Panel hopes, will assist in assessing frontline workers’ challenges as part of the Panel’s work next year. The Panel also gathered information on ORCA’s active development.

ORCA is an extensive system with multiple users at various levels performing numerous functions. Millions of dollars were invested in designing, building, and maintaining this system over the last decade. Despite this investment, as with most other systems of this magnitude, numerous challenges exist. Many states in the nation have similar systems. They are commonly referred to as State Automated Child Welfare Information systems (SACWIS), promoted by the Children’s
Bureau (CB) through its Division of State Systems (DSS). Almost all states report many challenges with their systems and CB is actively supporting the continued development of these systems.

Alaska’s ORCA management team is comprised of an ORCA project manager, a program officer, a research unit manager, 2 business analysts, 2 help desk personnel, and 3-4 developers. CGI, a business process servicing company from Illinois, is contracted to develop and implement ORCA, and provides ongoing management consulting. Approximately $8.3m were spent in management consulting contract supporting this system since 2011. ORCA is constantly under development. As of November 2014, there are approximately 300 specific issues on the waiting list to be addressed. Each of them may be a specific bug in the system that needs fixing (roughly half of them are bugs), or requests for changes in features offered in ORCA (approximately 12 are major change requests).

The Panel’s examination of ORCA will continue into next year.

GOAL 6: What are OCS’ strategies to recruit and retain resource families?

Resource families, commonly referred to as foster families, are families that provide temporary homes for children in state custody. There were over 2,300 children in foster placement settings each month during 2014. This number was well above 2,500 in April 2015, and will likely increase in the near future due to changes in protocols for substantiation. OCS identifies six different types of foster placement settings: two types of foster family settings (relative and non-relative), institutions, pre-adoptive homes, trial home visit, and other. Generally, assessing the need for foster families is challenging. The Panel gathered that the most acute need is for families that can care for sibling groups of 2 or 3 children, medically fragile children, and older teens. In addition, there is a general shortage of foster homes in rural areas of the state.

Recruitment and retention of foster families is a responsibility assigned to the OCS licensing unit. In an attempt to understand and assess OCS’ efforts to recruit foster families, the Panel met with Yurii Miller and Tandra Donahue, Community Care Licensing Managers at OCS. Seven supervisors and 24 Community Care Licensing Specialists (CCLS) are working on recruiting and licensing foster homes. Licensing is a very involved process comprising safety assessments, home inspections, home studies, background checks, and periodic monitoring of the foster family for safety of the children placed in the home.

Approximately 1,899 (79%) of children in foster care are in foster homes (both relative and non-relative), as of February 2015. Out of these, several children are in therapeutic foster homes, managed by independent Child Placement Agencies (CPA). The number of homes in the licensed column of the table presented here does not include those homes under CPAs.

Since the need for foster homes can never be accurately determined, recruitment efforts target the most challenging situations such as sibling groups, medically fragile children, and older teenagers. The target in rural areas is to have a couple of

<table>
<thead>
<tr>
<th>Regional Office</th>
<th>Licensing staff</th>
<th>Monthly average number of children under 21 in foster care (2014)</th>
<th>Status of foster homes or foster groups homes as of 3/3/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Supervisors</td>
<td>Specialists</td>
<td>Waiting to be licensed</td>
</tr>
<tr>
<td>ARO</td>
<td>2</td>
<td>9</td>
<td>898</td>
</tr>
<tr>
<td>SCRO</td>
<td>2</td>
<td>6</td>
<td>556</td>
</tr>
<tr>
<td>SRO</td>
<td>1</td>
<td>2</td>
<td>164</td>
</tr>
<tr>
<td>NRO</td>
<td>1</td>
<td>4</td>
<td>404</td>
</tr>
<tr>
<td>WRO</td>
<td>1</td>
<td>3</td>
<td>192</td>
</tr>
</tbody>
</table>
foster families available for placement when the need arises. Due to limited staff in rural areas, recruitment is challenging.

Recruitment efforts are primarily designed through Regional Recruitment and Retention Committees (RRRC). RRRCs are formed by OCS. Membership is comprised of CCLS, their supervisors, other CPS staff including adoption specialists, tribal partners, other partner agencies, Alaska Center for Resource Families (ACRF) staff, foster and adoptive parents. RRRCs focus on both recruitment and retention of resource families. They meet quarterly, or more often when they have events such as celebrating May as foster parent month. RRRCs develop regional plans with goals, action plan, and associated budgets which are then reviewed by State Office staff. Once approved, budgets and activities are monitored by licensing supervisors and managers. Regions with larger number of field offices identify multiple local recruitment and retention efforts that will be included into the regional plan. A Statewide Recruitment and Retention Plan (SRRP) is created by State Office staff from all the regional plans. SRRP is included as a part of the Annual Progress and Services Report (APSR).

The SRRP (last updated in April of 2014) was made available to the Panel (available on the Panel’s website). The Plan has four major activities – support to the regional and field offices, statewide efforts for retention and recruitment, FosterWear program, and Resource Family Advisory Board. Significant progress is reported on the first, third and fourth activities. Notably, development of protocols to track effectiveness of retention and recruitment efforts was one of the tasks under the first activity, and was reported as only 20% complete as of April 2014. The second activity includes tasks on efforts to recruit foster families to care for large sibling groups or medically fragile children, and Alaska Native foster families. The impressive Public Service Announcement, “One Child” encouraging Alaskans to consider becoming foster parents, is not part of the SRRP.

In addition to the RRRCs, there was a Native Rural Recruitment Team (NRRT), which is no longer active. Instead, each region is now participating in a program with Anne E. Casey Foundation’s Casey Family Programs to enhance tribal and state partnerships in recruitment and retention of native foster homes to increase ICWA preference placements. These regional efforts will be incorporated into the regional plans for each region.

None of the activities or tasks in the SRRP have any identified outcome measures to help in assessing progress. Admittedly, it is challenging to track and measure success of recruitment and retention strategies. Nevertheless, it is important to identify outcome measures. Since the need for foster families is unclear, and there are no measurable outcomes, the Panel is uncertain of OCS’ success in their efforts. The Panel encourages OCS to assess the need for foster families by region, by status of the foster child (medically fragile, sibling, etc.), by ethnicity, and other criteria, and to convey this information through appropriate and culturally sensitive channels to enhance recruitment. Outcome measures must be identified to adequately assess progress on the statewide plan. These two steps will provide tangible benchmarks for continuing efforts to recruit and retain foster families. In their absence, any effort may feel short of what is required.

Recommendation 4: Improve efforts to recruit and retain resource families across the state:

- Identify, and advertise through appropriate channels, a clear message on the approximate numbers of resource families needed.
- Identify outcome measures and track success of recruitment and retention efforts.
Every year, during the course of its work, the Panel comes across various issues of importance to the delivery of child protection services in Alaska. Many of these issues are interconnected, and overlap with the goals for that year. Below are issues the Panel considered during 2014-2015. These are reported here to give the readers a more complete account of the Panel’s work, and also to help readers understand the depth and scope of the Panel’s work. While its mandate is broad and covers everything that the state and local child protection system does in Alaska, the Panel is limited by the available resources. Thus, this list does not include several other issues that could have been considered during this year.

**TURNOVER IN PROTECTIVE SERVICE SPECIALIST (PSS) POSITIONS**

OCS and most other CPS systems across the country, struggle with high turnover in their frontline worker positions. OCS reported a consistently high turnover (approximately 30%) in these positions for the last decade. There can be a number of reasons for such high turnover. OCS staff survey results indicate high workloads and low pay among the principal reasons for considering leaving their positions.

Since workload issues are central for any organization to adequately perform, the Panel began efforts to understand the turnover in frontline PSS positions. These are positions that provide direct services to children and families, and are often the face of the agency. OCS provided the Panel with quarterly numbers on turnover and vacancies in these positions for the fiscal years 2012 through 2015. The agency had 278 PSS positions in 2012 and experienced 102 vacancies through the year, resulting in a staggering 37% turnover rate. Over the next three years, the turnover rate was 25% in 2013, 28% in 2014, and 27% in 2015. These numbers vary by region and WRO fares worst among all regions. The numbers for 2015 do not include the data from the last quarter ending in June 2015.

OCS data records 11 different reasons why a worker may have vacated the position. Over the last four years, resignation from the position was the most frequent reason for vacancy, followed by transfer within the division. In 2012, 19% of all positions were vacated through resignation. In the first three quarters of FY 2015, 11% of the total positions were vacated through resignation. While people resign for various reasons, such high proportion of vacancies through resignations is concerning. While it is true that most CPS agencies across the nation face similar challenges with turnover, reasons for it may vary by the agency, geographic location, and many other factors. It is impossible to address turnover without accurate and meaningful data. OCS currently does not have any meaningful data from exit interviews. The Panel is trying to understand the obstacles for OCS to obtain such data to inform action to curb the turnover rate.
EMPLOYEE SURVEYS

OCS frequently surveys its employees to understand their working conditions and other operational issues. These surveys are of high value to inform internal human resource management. Given the high turnover rates in the PSS positions, the Panel is interested in these surveys. The Panel was informed that the current employee survey was designed with input from various stakeholders several years ago. Upon OCS request, the Panel offered extensive feedback on restructuring various questions in the 2014 version of the survey. The survey needs considerable further improvements and the Panel strongly encourages OCS to redesign the instrument and allow meaningful data collection that can help managers and supervisors.

The survey is answered by everyone in the agency. A summary results document was made available to the Panel. Results were summarized for the entire workforce, without any delineation between different positions. It was impossible to know the responses of those in PSS positions as opposed to those in managerial positions. Since the turnover is so high among PSS positions, it will be important to know the opinions of those in PSS positions on important issues such as pay and reasons for staying or leaving their positions. OCS assured the Panel that both the survey instrument and the results format are useful to its management in making decisions. While the Panel is skeptical, we trust that OCS does in fact find them useful.

Recommendation 5: Improve the survey instruments and reporting of results on various surveys that OCS QA unit conducts to assess important components of OCS operations.

WORKLOAD ASSESSMENT

The Panel briefly reviewed OCS’ efforts in assessing the workload of frontline workers. OCS commissioned two workload studies, one in 2006 and another in 2012. The 2006 study focused on frontline workers and recommended adding several new positions. The legislature funded and new positions were promptly filled. The 2012 study focused on Social Service Assistants (SSA) and Community Licensing Care Specialists (CLCS) and recommended several new positions in both categories. This was partially funded during FY 2015.

While the Panel agrees that OCS needs additional workers to meet its statutory mandate, and agrees with both workload studies’ recommendations on adding additional positions, the Panel is uncertain on the derived benefits of adding additional positions in light of the high worker turnover. As an illustration, OCS workers were stretched too thin before adding approximately 80 frontline workers in response to the 2006 study. A few years later, workers again found themselves stretched too thin. There certainly is a definite increase in the number of reports of harm OCS receives and addresses, and the number of cases for all PSS positions. While it is accurate to say that more reports of harm directly increase the workload, number of reports of harm is not the only factor. The Panel finds OCS focused on increased workload, but finds very little discussion on workload management.

Workload is currently measured by the number of cases. The Panel learned from site visits to both ARO and SRO that IA workers often have approximately 40 cases on their workload. In-home case load was around 60-70 cases per worker in WRO during the Panel’s visit both in 2014 and 2015. Family Services workers have relatively fewer cases on their workload. However, the number of cases is a very poor measure of workload for several reasons, principal among them being the diversity in the nature of each case. Some cases may have just one child and a small family, while another case may have 10 children with a large network of extended family and related players. While both cases are counted as one, they obviously differ in the amount of work they take to manage. It is the Panel’s
understanding that OCS supervisors make judicious decisions in assigning cases to workers based on individual workers’ current case load. Nevertheless, a heavy workload is an agency-wide issue and needs a more systematic approach, beyond adding additional workers.

The Panel strongly encourages OCS to explore ways to help frontline workers and their immediate supervisors manage their workload. The Panel realizes this is a complex multidimensional issue, and requires careful thought and intentional action. As a first step, we suggest implementing a recommendation from both 2006 and 2012 workload studies that OCS identify a method to compute, track, and continuously assess workloads of frontline workers in all units, by region. Several other states have distinct models that can be explored. However obvious it may be that OCS needs additional workers, adding positions is not a panacea that will cure the workload issues which impact retention, quality of life, and secondary trauma that frontline workers face. If OCS truly is to be a trauma-informed organization as it aims to be, addressing frontline workers’ workload will be a necessary step.

**Recommendation 6: Adopt a method to identify, measure, and assess various components of workload of frontline workers.**

**DATA SHARING**

The Panel requires data and information to adequately meet its mandate. The Panel collects information from various sources through the year. However, in order to fulfill the mandate of reviewing the state’s child protection system, the most important source of the data is the OCS ORCA system. The Panel thus is heavily reliant on the ability and willingness of OCS to share data as requested. The Panel is pleased with the responsiveness of the ORCA staff in providing the required data when requested.

Beyond that, the Panel is also aware of several efforts underway to reorganize the online data access page. In addition, OCS is also working on establishing data sharing protocols with its various partner agencies and other interested entities. The Panel is looking forward to note the progress on these efforts and we commend the initiatives on this front.

**PANEL’S SURVEY EFFORTS**

The Panel conducted a survey of all Indian Child Welfare (ICWA) workers and other representatives from several Alaska Native tribes that attended the Bureau of Indian Affairs ICWA work session at the Providers Conference in December 2014 in Anchorage. The survey focused on OCS-Tribe relationships in Alaska. A primary finding of the survey was “child protection system in most Alaska’s communities is a multiple-entity system heavily dependent upon interagency relationships and communication. These relationships currently seem to lack any institutional/organizational framework or structure, and are dependent on individual workers’ ability and desire to partner.” OCS provided input on the design of the survey. A report of the survey results is included in the appendix. The Panel intends to expand its survey efforts to gain a better understanding of several issues and increase its public outreach.

**OCS-PARTNER AGENCY RELATIONSHIPS**

The Panel continues to find several challenges in relationships between OCS local offices and their local partners. Challenges range from basic trust issues to communication, and responsiveness. While relationship is always a two-way street, we believe OCS can contribute by devising a protocol for its workers to begin a constructive relationship, nurture it, and sustain it. This is most critical in remote rural areas with a severe shortage of services.
Appendices are not included with this report. They are all available on the CRP website at www.crpalaska.edu. Please refer to them for further information.

1. Anchorage Region Site Visit Report
2. Southeast Region Site Visit Report
3. Western Region Site Visit Report
4. BIA Providers Conference Survey Results
5. Legislative Visit Report
6. CRP National Conference Report
7. OCS Statewide Recruitment and Retention Plan

CHILD PROTECTIVE SERVICES IN ALASKA are administered through a complex network of various government, non-government, tribal, for-profit, non-profit, and private agencies and organizations. A majority of these entities are located in Anchorage, or other major urban centers or hub communities across the state. The Office of Children Services (OCS) is a state-designated agency, primarily responsible to respond to and address reports of child maltreatment, and to provide child protective services in Alaska. It is situated within the Department of Health and Social Services. OCS operates through 5 regional offices and 25 field offices. In addition, OCS provides a number of its services through contracts and grants to numerous organizations located across the state.